

**Application Data Sheet**  
**Application Information**

**Application number::**

**Filing Date::** September 5, 2003

**Application Type::** Regular

**Subject Matter::** Utility

**Title::** Self-Service Customer License Management Application  
Using A Group Administration Application

**Attorney Docket Number::** BEAS-01454US2

**Request for Early Publication?::** No

**Request for Non-Publication?::** No

**Suggested Drawing Figure::** 2

**Total Drawing Sheets::** 4

**Small Entity?::** No

**Applicant Information**

**Applicant Authority Type::** Inventor

**Primary Citizenship Country::** United States

**Status::** Full Capacity

**Given Name::** Carey

**Middle Name::** E.

**Family Name::** Garibay

**Name Suffix::**

**City of Residence::** Campbell

**State or Province of Residence::** California

**Country of Residence::** United States

**Street of mailing address::** 75 N. Second Street

<b>City of mailing address::</b>	Campbell
<b>State or Province of mailing address::</b>	California
<b>Country of mailing address::</b>	United States
<b>Postal or Zip Code of mailing address::</b>	95008
<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship Country::</b>	United States
<b>Status::</b>	Full Capacity
<b>Given Name::</b>	Thomas
<b>Middle Name::</b>	
<b>Family Name::</b>	Han
<b>Name Suffix::</b>	
<b>City of Residence::</b>	Cupertino
<b>State or Province of Residence::</b>	California
<b>Country of Residence::</b>	United States
<b>Street of mailing address::</b>	10733 Culbertson Drive
<b>City of mailing address::</b>	Cupertino
<b>State or Province of mailing address::</b>	California
<b>Country of mailing address::</b>	United States
<b>Postal or Zip Code of mailing address::</b>	95014
<b>Correspondence Information</b>	
<b>Correspondence Customer Number::</b>	23910
<b>Phone number::</b>	(415) 362-3800
<b>Fax Number::</b>	(415) 362-2928
<b>Email address::</b>	jpo@fdml.com

## **Representative Information**

**Representative Customer Number::** 23910

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	An application claiming the benefit under 35 USC 119(e)	60/485,867	07/09/03

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

### **Assignee Information**

**Assignee Name::** Bea Systems, Inc.  
**Street of mailing address::** 2315 North First Street  
**City of mailing address::** San Jose  
**State or Province of mailing address::** California  
**Country of mailing address::** United States  
**Postal or Zip Code of mailing address::** 95131